

**PARLIAMENT**

P.O. Box 66036, London, KY 40742-6036

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2077469859

**THANKS FOR COMING.  
YOU WERE THE LIFE OF THE PARTY ZONE.**

2077469860

Thanks for attending our last Party Zone event. We want to keep you in the loop. Stay on top of all our Parliament goings-on by simply filling out and sending back the attached card.



**SURGEON GENERAL'S WARNING: Quitting Smoking  
Now Greatly Reduces Serious Risks to Your Health.**



8 mg "tar," 0.6 mg nicotine av.  
per cigarette by FTC method.

## WHAT DO YOU THINK OF THE PARTY ZONE?

*This survey is for smokers 21 years of age or older.*

Don't miss a thing Parliament does in the future. Please take a few minutes to complete and return this survey.  
Thanks for your help!

1. If any of the information printed below is incorrect or outdated please make the necessary changes in the space provided.

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

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2. What did you think of the recent Party Zone event in your area?  
☐ It was great. ☐ It was pretty good. ☐ It was so-so.

3. Would you attend another Party Zone event in your area if you were notified of it beforehand?  
☐ Yes. ☐ No. ☐ I don't know.

4. Would you invite a friend(s) to the next Party Zone event?  
☐ Yes. ☐ No. ☐ I don't know.

5. Do you have a smoker friend, 21 years of age or older, that may be interested in attending the next Party Zone event in your area?

Name: \_\_\_\_\_

Address: \_\_\_\_\_

We assure you that no names will be sold, and we will not permit the use of a name by any company that is not affiliated with Philip Morris.

By responding to this survey and signing below, I certify that I am a cigarette smoker 21 years of age or older. I am also willing to receive cigarette coupons and incentive items in the mail, subject to applicable state and federal laws.

Signature (required) \_\_\_\_\_

Birth Date (required) \_\_\_\_/\_\_\_\_/\_\_\_\_ Today's Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_